

**Illinois Children and Family Services Advisory Council**  
WebEx/Conference Call

**September 10, 2020 – 3:30-5:00p.m.**  
**APPROVED MINUTES**

**I. Welcome and Introduction**

- a. Members: Lanetta Turner, Tim Egan, Anita Weinberg, Marge Berglind, Jennifer Hansen, Brittani Kindle, Sherry Crabb
- b. DCFS: Tierney Stutz, Meaghan Jorgenson, Luke Hinds
- c. Youth in care: None
- d. Public: None

**II. Approval of Minutes from June 11, 2020**

Corrections to minutes proposed by Marge Berglind – changing the date of approved minutes listed from June 2020 to March 2020.

On a motion by Jennifer Hansen, seconded by Anita Weinberg, the minutes were unanimously approved with the stated correction.

**III. Report from Nominating Committee**

Marge Berglind reported that the nominating committee did meet last month and came up with a few suggestions for this council. They suggest a slate of officers and as part of the job of the nominating committee forming some leadership so we can recruit some members. It has been harder and harder to get a quorum and get things done. Marge will create a one-pager cheat sheet that any member can use, if they're talking to a prospective advisory council member.

**IV. Discussion Item: Recommendation from nominating committee for election of officers**

The recommendations for council leadership are the following:

Secretary: Brittani Kindle  
Co-Chair: Jennifer Hansen  
Chair: Marge Berglind

On a motion by Anita Weinberg, seconded by Brittani Kindle, the council unanimously approved the slate of officers.

Ms. Berglind noted she would like to formally thank Bob Bloom for his past co-chairing of this council and professional counsel for the group for a number of years. We appreciate all his efforts.

Marge noted that she looks forward to working with the group to continue its vitality and come up with some good ideas. She looks forward to getting to know all of you better, even though it's over computers at the moment. Some day we shall meet in person again. We want to send our good wishes to Alexa and DCFS staff. Thank you to Meaghan and Helena for filling in and helping us out in Alexa's absence.

### **III. Discussion Item: Headcount**

Luke Hinds presented data on DCFS and POS Headcount. He is with budget and finance for DCFS and works on the operations budget and layout caseloads needs. These sheets show DCFS and POS ratios.

Luke shared two reports with the group by screensharing. The reports were titled "Caseload Information (DCFS POS) Aug 2020.pdf" and "Call Volume by Month (SCR)". Luke reviewed the information from the reports with the group.

The spreadsheet shared by Luke to the group covered headcount caseload and vacancy information. (See attached report.) the following information concerning DCFS and POS broken down by region (Central, Cook, Northern, and Southern):

Luke also shared and explained to the group the SCR Callfloor Worker Headcount (Jul 2014 – Aug 2020) chart. This was a bar chart that shows the progress that has been made in the past six years by month. We are at the highest that we have ever been (as of August 2020) and that number is growing. Luke shared an additional chart showing the call volume by month from 2017 – current.

Marge noted that due to the lockdown people have speculated that the calls are down. What is DCFS doing to prepare for any spikes that may come once children get back in touch with school teachers and doctors? Is DCFS prepared for these spikes on all levels should they come in?

Tierney Stutz responded as the Deputy Chief of Staff with DCFS. During the weekends it was remarkable to see that the call volume did not go down from pre-COVID. It did drop during the week on the monthly average in the 50-57% range. Now that we have returned to school, we have closed the gap significantly. In the past month we are currently in about a 18% call drop in volume. We are taking more investigations for this past week and month than we did for the same reporting period last year. The incredible hiring that we have done at the hotline has been an incredible support to be able to handle the call volume. The field's ability to respond to the possible surge shows about a 6% in call volume. Child protection has been able to absorb that with assigning about 2.5-3 cases to per investigator per week.

Anita Weinberg asked if there is any way to know what has happened during those three months when there was a dip? Were kids being harmed more, and it wasn't reported due to isolation?

Tierney Stutz noted that is a great question and it's something that not only here in Illinois and the researchers that we work with – and several agencies nationwide have looked closely at. We only have data and the actions that we took as an agency insure that we were reaching out as best we could during those times. There is significant research that we are looking at with our partners at Chapin Hall that teachers are the lowest group that provide substantiated reports. Some reports show that somewhere between 2%-15% of teachers reports become indicated. We think about marginalized communities and what's really happening with what it means to be a mandated reporter. Regardless it does not change for a moment the commitment of the department to ensure that children are being seen in any way they can by anyone who know them well and care for them well. We have written letters to ISBE reminding teachers as our partners in caring for the children and families in Illinois. We have created and informed teachers of a way to send their mandated reports to an email, so they do not have to mail it or fax it. We're making sure we have paved the way for easy access to reporting. Our medical director has written letters, in her role on the Executive Board of Illinois American Academy of Pediatrics, reminding them of the signs to look for of suspected abuse – even in a telehealth visit. We have had many conversations with people in different trauma councils throughout the community to spread the word to continue to report – to check on and care for the families that we support. Not looking for reasons to support, but to check on them. This is a very stressful time. The things going on during this pandemic exacerbate some of the things we all know contribute to abuse and neglect, whether it be loss of jobs, worrying about housing or food.

Meaghan Jorgenson pointed out the American Academy of Pediatrics. DCFS sent a letter to all the pediatricians in the state. We are working on a second one right now. It is with the same outline of ISBE just reminding them we're still here, we're still open and you might be the only person who is seeing a child. We have also revamped our You Are Not Alone campaign. It is based on empowering children themselves or even a friend of a child that is being abused to call the hotline. We sent those letters to health departments and community clinics statewide so that kids can see that and know that they can call.

Marge Berglind asked about kids that are missing from online learning. Some teachers are reporting that kids are not attending that once were. In normal circumstances something would happen to figure out if the child was doing okay at home and why they weren't coming to school. Is anything like that amplified right now to report that?

Meaghan Jorgenson responded that ISBE only has so much control over school metrics. That is something that varies across the state, based on the metrics that the school has in place. Some districts are investigating. Truancy is not an allegation by itself, but truancy is an indicator of what may be going on in the home. Schools will go out and check. If they arrive and find something out that needs to be reported – that's when the situation gets reported.

Marge Berglind noted that we don't know what the answer is, but it is a concern that I think this committee would want DCFS to review in some way.

Meaghan Jorgenson: We have had a lot of communication with ISBE regarding this and they are encouraging that these situations be investigated. CCIS was not part of that, but I can check with them to see if they would be willing to send more. They could just send state resources out as well. I can check into that.

Another question was asked as to what the department is doing especially with outreach to communities. We've heard that a large number of children had been seriously harmed and even died during this time, but that was just hearsay, so we don't know if it is true. It is still alarming to hear. The lower number of intact cases is surprising. Is there any focus on developing that more as we see what's happening to families and how they're impacted by COVID?

Luke noted that DCFS is in the process of hiring more staff for intact.

Marge Berglind asked how does the current case count look overall for Intact? Is it up?

Meaghan Jorgenson reported that Intact currently has almost 4,200 cases. Currently last year there were 3,700. That would indicate that more families are participating in intact services, which is a good trend. That is all the information available at this time.

Marge Berglind requested DCFS do a more streamlined report addressing the questions that I had about whether the various caseload ratios, public and private, are in compliance with the consent decrees.

If they're not, what is DCFS's plan for remedying that? Where are the residential cases showing up? They are not separated out by type of placement. One of the concerns is whether there were sufficient workers over the cases in residential or whether those workers were doing what they're supposed to be doing to follow up with residential. Of course, whether they're doing what they're supposed to do will not be reflective in your statistics, but that would be a start to look at that issue. Perhaps for the next meeting if you could streamline that

Luke Hinds responded yes and no. As far as compliance I would defer to Solomon and Mandy Wolfman who are experts on BH.

Marge Berglind noted that if DCFS gives us a caseload ratio and they're not in compliance we can see for ourselves. For example, are caseloads compliant? Are ratios compliant overall? I think what we're supposed to be looking at as an advisory council.

Luke Hinds referred to the charts. For BH 25/1 is the ratio for follow-up caseworkers – the permanency workers. If we look at the ratio as of Aug. 5, 2020 – on a regional level it is not exceeding that. There are pockets that could be over or under.

Marge Berglind noted that really doesn't answer what we are looking for. Specialized is mixed in here and they have a very different set of case ratios. BH has a set of defined principles about various forms of care and caseload ratios.

Luke Hinds noted that for the DCFS Spec Foster Care we don't differentiate – the contractual language for POS puts Spec at 10/1, but that's not the case at DCFS.

Marge Berglind noted we're not looking at DCFS. Most of the cases are on the private sector, so that's where we have to look for the problems.

Luke Hinds noted we were asking about compliance on the POS side and had misunderstood.

Marge Berglind noted we need to look at both. And you've got to sort out some of these caseloads and not lump them, because again contractually agencies are required to have lower caseload ratios in some cases. Let's do a follow-up. Anyone on the committee with a follow-up question please send it to me.

Meaghan Jorgenson noted DCFS has hired someone that will be in charge of the advisory boards and commissions. There is a death and serious injury report that the legislature requires. It is on ILGA.gov. My office completes it. They last one was April, May and June. I will say there is not a dramatic increase of the previous one. That was the fear. We can take a closer look at some of those. I will send you a link to that. It is usually updated in November.

Marge Berglind: Thank you, Luke, for getting us this information. I know we haven't always given you clarity on what we wanted. Thank you for continuing to work with us. We will get it down to a set of data that is really useful for this committee to make something out of for the next meeting.

## **V. Discussion Item: COVID-19 & Impact on DCFS youth and families continued discussion**

Marge Berglind asked the group is there was anything on our previous discussion about the impact of COVID-19 and DCFS's response to all kids in care – both the older youth in care and the younger kids that you would like to analyze further? I know we discussed a couple of things that were needed to amplify DCFS communication about the availability of computers. Was there a specific set of follow-up questions that anyone would like to address today?

Anita Weinberg asked if we now can facilitate in-person visits, even if they have to be supervised. I think a lot of these are happening outdoors to be safe. What is happening in anticipation of cold weather? And what about when/if numbers go up? What can be done to avoid a blanket ban again?

Meaghan Jorgenson responded that If there was a mechanism for them to meet outside, we are encouraging that. You are the first person to pose this question. I am going to ask

specifically what we are advising for when it starts to get cold. One of the other questions that stuck out to me from the list in the previous meeting that I would love to answer is: The total exposure and positive youth. The total during this whole time is 488 out of approximately 19,000. This is positive and exposed. To give you a breakdown: 359 of them we have moved and consider recovered or inactive meaning nothing developed after an exposure. The remaining we are still watching. Last week we received seven new reports. Central and southern Illinois is where those were from. Back in June we had one child that was hospitalized; however, they did have other health issues beyond COVID. They have recovered.

Group has agreed to a Google poll to be done to set future meeting dates and times.

**VI. Public Comment**

None

**VII. Adjournment**

On a motion by Anita Weinberg seconded by Tim Egan the council agreed to adjourn.